



# Department of Defense **DIRECTIVE**

September 3, 1997  
**NUMBER 1010.4**

**ASD (SO/LIC)**

SUBJECT : Drug and Alcohol Abuse by DoD Personnel

- References:
- (a) DoD Directive 1010.4, subject as above, August 25, 1980 (hereby canceled)
  - (b) DoD Directive 1010.3, "Drug and Alcohol Abuse Reports, " September 23, 1985 (hereby canceled)
  - (c) American Psychiatric Association, "Diagnostic and Statistical Manual of Mental Disorders, " current edition
  - (d) Section 801 et seq. of title 21, United States Code
  - (e) through (1) , see enclosure 1

A. REISSUANCE AND PURPOSE

This Directive reissues reference (a) and replaces reference (b) to update DoD policies and responsibilities for drug and alcohol abuse prevention.

B. APPLICABILITY AND SCOPE

1. This Directive applies to the Office of the Secretary of Defense (OSD) , the Military Departments ( including the Coast Guard when it is operating as a Military Service in the Department of the Navy) , the Chairman of the Joint Chiefs of Staff, the Combatant Commands, and the Defense Agencies (hereafter referred to collectively as "the DoD Components") . The term "Military Services, " as used herein, refers to the Army, the Navy, the Air Force, and the Marine Corps.

2. The terms and provisions of this Directive are not intended to modify or otherwise affect statutory provisions and those regulations or DoD Directives concerned with determination of misconduct and criminal or civil responsibilities for persons' acts or omissions.

**C. DEFINITIONS**

1. Alcohol Abuse. The use of alcohol to an extent that it has an adverse effect on the user's health or behavior, family, community, or the Department of Defense, or leads to unacceptable behavior as evidenced by one or more acts of alcohol-related misconduct.

2. Alcohol Dependence and/or Alcoholism. Psychological and/or physiological reliance on alcohol, as such reliance is defined by the American Psychiatric Association Manual (reference (c)).

3. DoD Civilian Employee. A permanent employee of the Department of Defense who is a U.S. citizen and who is paid from appropriated or nonappropriated funds.

4. Drug Abuse. The wrongful use, possession, distribution, or introduction onto a military installation of a controlled substance, prescription medication, over-the-counter medication, or intoxicating substance (other than alcohol) . "Wrongful" means without legal justification or excuse, and includes use contrary to the directions of the manufacturer or prescribing **healthcare** provider, and use of any intoxicating substance not intended for human ingestion.

5. Drug Abuse Paraphernalia. All equipment, products, and materials of any kind that are used, intended for use, or designed for use, in planting, propagating, cultivating, growing, harvesting, manufacturing, compounding, converting, producing, processing, preparing, testing, analyzing, packaging, repackaging, storing, containing, concealing, injecting, ingesting, inhaling or otherwise introducing into the human body a controlled substance in violation of 21 U.S.C. 801 et seq. (reference (d)).

6. Drug Dependence. Psychological and/or physiological reliance on a chemical or pharmacological agent as such reliance is defined by reference (c) . The term does not include the continuing prescribed use of pharmaceuticals as part of the medical management of a chronic disease or medical condition.

7. Prevention Programs. Training, education and public information activities designed to influence participants to avoid drug and alcohol abuse.

D. POLICY

It is DoD policy to prevent and eliminate drug and alcohol abuse and dependence from the Department of Defense. Such abuse and dependence are incompatible with readiness, the maintenance of high standards of performance, and military discipline. The Department of Defense also recognizes that alcoholism is a progressive disease that affects the entire **family** and that it is both preventable and treatable; therefore, it is DoD policy to:

1. Deter and identify drug and alcohol abuse and dependence that exist on installations and facilities under DoD control.

2. Not access military **personnel** or hire civilian employees into the Department of Defense who are drug dependent or active drug abusers. The policy on military accession or new entrant testing and dependency evaluation is described in DoD Instruction 1010.16 (reference (e)) .

3. Periodically assess the extent of drug and alcohol abuse in the Department of Defense.

4. Provide education and training on DoD policies for drug and alcohol abuse and/or dependency, and on effective measures to alleviate problems associated with alcohol and drug abuse and/or dependency.

5. Counsel military personnel who abuse alcohol and provide treatment and/or rehabilitation in accordance with DoD Directives 1010.1 and 1010.7 (references (f), (g)), and other applicable laws, regulations, and **policies**. Initiate administrative actions against Service members who refuse to participate in counseling or refuse to enter or successfully participate in an alcohol treatment and/or rehabilitation program for alcohol abuse. Separation of Service members who do not comply with the retention standards established by the Military Services shall be in accordance with DoD Directive 1332.14 (reference (h)). For civilian employees, personnel actions shall be taken in accordance with DoD Directive 1010.9 (reference (i)), and the Civil Service Reform Act of 1978 particularly, Chapter 75 of 5 U.S.C. (reference (j)).

6. Counsel, discipline, and/or process drug abusers for separation and refer or provide treatment to civilian employees in accordance with laws, regulations, and **DoDDirectives**. For drug abuse, separation of Service members who do not comply with

the retention standards established by the Military Services shall be in accordance with reference (h) . The policy on hiring and firing civilian employees is described in DoD Directive 1010.9, reference (i).

7. Prohibit DoD personnel from possessing, selling, or using drugs or alcohol other than in accordance with laws, regulations, and DoD Directives.

8. Prohibit members of the Military Services, and DoD civilians, to possess, sell, or use drug abuse paraphernalia, and prohibit the possession or sale of drug abuse paraphernalia by DoD resale outlets to include military exchanges, open messes, and **commissaries**, and by private organizations and concession located on DoD installations.

#### E. RESPONSIBILITIES

1. The Under Secretary of Defense for Policy shall ensure that the DoD Coordinator for Drug Enforcement Policy and Support shall:

a. Develop and promulgate policies to ensure the detection and deterrence of drug abuse and dependence by DoD military and civilian employees.

b. Monitor and coordinate all DoD activities that implement **E.O.** 12564 (reference (k)), and the drug abuse provisions of 49 CFR 40 and 382 (reference (l)).

c. Develop and promulgate policies relating to education of DoD **personnel** on DoD drug abuse policy.

d. Develop and promulgate the technical procedures and standards that implement military and civilian biochemical testing program policies.

2. The Assistant Secretary of Defense for Health Affairs, under the Under Secretary of Defense for Personnel and Readiness, shall:

a. Develop and promulgate policies to identify and discourage alcohol abuse by DoD military and civilian employees.

b. Develop and promulgate alcohol and drug treatment and rehabilitation program policies.

c. Educate DoD personnel about health risks associated with drug and alcohol abuse and train healthcare personnel to prevent, diagnose, and treat substance abuse.

d. Conduct **epidemiological** studies to assess the extent of alcohol and drug use and related health behaviors among military personnel in both the Active and Reserve components.

3. The Assistant Secretary of Defense for Force Management Policy, under the Under Secretary of Defense for Personnel and Readiness, shall:

a. Promulgate policies on alcohol and drug abuse prevention programs for DoD Dependent Schools.

b. In coordination with the Assistant Secretary of Defense for Health Affairs (**ASD(HA)**), and the DoD Coordinator for Drug Enforcement Policy and Support, periodically assess the extent of drug and alcohol abuse within the Department of Defense.

4. The Heads of the DoD Components shall be responsible for the enforcement of policies established by or under the authority of this Directive and for the implementation of any programs established under this Directive by the DoD Coordinator for Drug Enforcement Policy and Support and/or **ASD(HA)**.

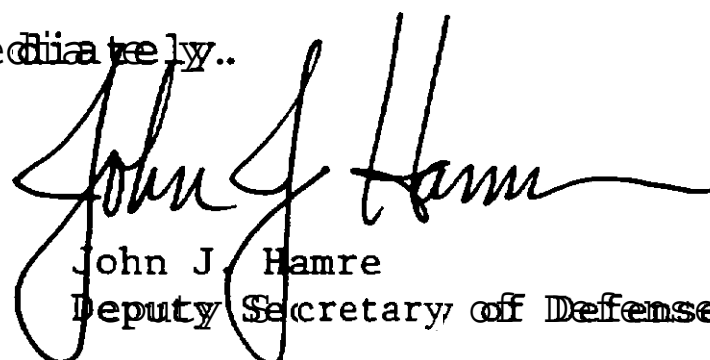
#### F. INFORMATION REQUIREMENTS

1. The reporting requirements under DD Form 2396, DD Form 2394, DD Form 2395, DD Form 2397 and DD Form 2398 are canceled.

2. All DoD Components shall provide to the Office of the DoD Coordinator and the **ASD(HA)** a copy of the completed "Federal Drug-Free Workplace Programs Annual Report," required by Department of Health and Human Services' Substances Abuse and Mental Health Services Administration.

#### G. EFFECTIVE DATE

This Directive is effective immediately..

  
John J. Hamre  
Deputy Secretary of Defense

Enclosure  
References

REFERENCES, continued

- (e) DoD Instruction 1010.16, "Technical Procedures for the Military Personnel Drug Abuse Testing Program," December 9, 1994
- (f) DoD Directive 1010.1, "Military Personnel Drug **Abuse** Testing Program," December 9, 1994
- (g) DoD Directive 1010.7, "Drunk and Drugged Driving by DoD Personnel," August 10, 1983
- (h) DoD Directive 1332.14, "Enlisted Administration Separations," December 21, 1993
- (i) DoD Directive 1010.9, "DoD Civilian **Employee** Drug Abuse Testing Program," August 23, 1988
- (j) Chapter 75 of title 5, United States Code
- (k) Executive Order 12564, "Drug-Free Federal Workplace," September 15, 1986
- (l) Title 49, Code of Federal Regulations, Parts 40 and 382